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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/822,716	03/30/2001	David A. Edwards	2685.1003-008	7248
38421 ELMORE PA	7590 10/23/2008 FENT LAW GROUP, PO	EXAMINER		
515 Groton Road Unit 1R Westford, MA 01886			HAGHIGHATIAN, MINA	
			ART UNIT	PAPER NUMBER
			1616	
			MAIL DATE	DELIVERY MODE
			10/23/2008	PAPER

## Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.



#### UNITED STATES PATENT AND TRADEMARK OFFICE

### Board of Patent Appeals and Interferences

ELMORE PATENT LAW GROUP, PC 515 GROTON ROAD

UNIT IR

WESTFORD, MA 01886

Appeal No: 2007-1137

Appellant: David A. Edwards et al.

Application No: 09/822,716

Hearing Room: A Hearing Docket: A

Hearing Date: Tuesday, December 09, 2008

Hearing Time: 01:00 PM Location: Madison Bu

Madison Building - East Wing 600 Dulany Street, 9th Floor Alexandria, Virginia 22313-1450

#### NOTICE OF HEARING CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquires, please contact the Clerk of the Board at 571-272-9797.

The application involved in this appeal has been published. Accordingly, the hearing in this appeal is open to the public.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

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In all communications relating to this appeal, please identify the appeal by its number.								
CHECK ONE: ( ) HEARING ATTENDANCE CONFIRMED ( ) HEARING ATTENDANCE WAIVED								
Signature of Attorney/Agent/Appellant	Date	Registration No.						
Names of other visitors expected to accomp	any counsel:							

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